

FROM McANDREWS HELD &amp; MALLOY

(THU) 10. 27' 05 17:13/ST. 17:12/NO. 4861050714 P 2

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10/28/2005 TBESHAH2 00000058 070845 10065866

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**Christopher R. Carroll**

(Depositor's Name)

*Christopher R. Carroll*

(Signature)

**October 27, 2005**

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR     | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|--------------------------|---------------------|------------------|
| 10/065,866      | 11/26/2002  | Muthurvelan Varadarajulu | 129716              | 3390             |

TITLE OF INVENTION: GROUTED TILTING PATIENT POSITIONING TABLE FOR VASCULAR APPLICATIONS

| APPLN. TYPE      | SMALL ENTITY | ISSUE FEE      | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|------------------|--------------|----------------|-----------------|------------------|------------|
| nonprovisional   | NO           | \$1400         | \$300           | \$1700           | 12/01/2005 |
| EXAMINER         | ART UNIT     | CLASS-SUBCLASS |                 |                  |            |
| SANTOS, ROBERT G | 3673         | 005-611000     |                 |                  |            |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
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**McAndrews, Held & Malloy, Ltd.**

**Peter J. Vogel**

**Michael A. Dellapenna**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**GE MEDICAL SYSTEMS GLOBAL**  
**TECHNOLOGY COMPANY, LLC**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**WAUKESHA, WISCONSIN**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  
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Authorized Signature

*Christopher R. Carroll*

Date

**October 27, 2005**Typed or printed name **Christopher R. Carroll**Registration No. **52,700**

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|   | Telephone: 312/775-8000<br>+Facsimile: 312/775-8100 |

## FACSIMILE COVERSHEET

**TO:** **ISSUE FEE**  
**Examiner Santos, Robert G.**  
**Application No. 10/065,866**  
**Attorney Docket No. 129716**

**Fax:** (571) 273-2885

**FROM:** **Christopher R. Carroll**  
**Fax:** **312/775-8100**

**DATE:** **October 27, 2005**  
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Christopher R. Carroll

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